

NEW JERSEY SALES TAX AMENDED RETURN

FID # _____

TAXPAYER NAME _____

T/A _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

QUARTER ENDING				YEAR
MARCH 31	JUNE 30	SEPT 30	DEC 31	

		ORIGINALLY REPORTED		AMENDED	
1. Gross Receipts for Quarter (To Nearest Dollar)	•		00		00
2. Deductions (To Nearest Dollar)	•		00		00
3. Balance Subject to Tax (Line 1 minus Line 2) (To Nearest Dollar)			00		00
4. Sales Tax Due (Greater of amount collected or applicable rate of Line 3) See Note *					
5. Use Tax	•				
6. Total Tax Due (Line 4 plus Line 5)	•				
7. Total Monthly Payments (Month 1 plus Month 2)					
8. Quarterly Amount Due (Line 6 minus Line 7)					
9. Penalty and Interest	•				
10. Adjusted Amount Due (Line 8 plus Line 9)	•				

Reason for Amending Return:

*** NOTE:** Tax Rates

6% 1/1/83 thru 6/30/90

7% 7/1/90 to 6/30/92

6% 7/1/92 to present

I verify and affirm that all tax information on this return is correct. I am aware that if any of the foregoing information provided by me is knowingly false, I am subject to punishment.

(Signature)

(Title)

(Date)